

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Renée D. Coleman-Mitchell, MPH
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

May 10, 2019

Via email leeannducat@gmail.com

LeeAnn Ducat

Founder, Informed Choice CT

Dear Ms. Ducat:

This correspondence is in response to your letter to me, dated May 3, 2019.

The Department of Public Health (DPH) appreciates your concerns regarding its decision to disclose immunization-rate data at the school-level for all schools with a kindergarten class size of equal to or greater than thirty students; however, DPH respectfully disagrees with your claims, including your claims that releasing the information is discriminatory and a potential HIPAA violation, as more fully discussed below.

While you claim that "it may be relatively simply (sic) for parents and students to deduce which students are claiming a religious exemption...", it must be noted that DPH is releasing the data at an aggregate level and does not identify any specific child. More importantly, the aggregate-level immunization rate data can provide parents and guardians of immune-compromised and other children, including those who have not obtained vaccines due to religious beliefs, with the information that is necessary to make informed decisions about their children.

DPH also disagrees with your claim that release of these data may potentially violate the Health Insurance Portability and Accountability Act (HIPAA). HIPAA is a complex federal law and a complete discussion of its application to the Department and this data is beyond the scope of this correspondence; however, suffice it to say that the DPH has carefully considered your claim in this regard and disagrees that HIPAA applies to the release of said data and further maintains that the release of such data within the specified parameters does not constitute a release of personally-identifiable information in violation of HIPAA.

Regarding DPH's ability to share the immunization rate data at any level, DPH has a long history of treating these data as morbidity and mortality data within section 19a-25 of the General Statutes. Conn. Agencies Regs. Sec. 10-204a-4, as cited in my May 3, 2019 letter, provides that the information is confidential, but does not define that term. In light of that fact and the fact that these data are used by DPH for morbidity and mortality studies, DPH has determined that section 19a-25 of the General Statutes and, consequently, the corresponding



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regulations at 19a-25-1, et seq. apply to the immunization data. Under those regulations, DPH has the discretion to share data at various levels with various people. See Conn. Agencies Regs. Secs. 19a-25-2 and 19a-25-3. Thus, in this case, DPH has exercised its discretion to release these data under said regulations.

It is important to note that the release of such data is becoming a routine public health practice. All neighboring states except New Hampshire provide these same school-level data to make parents aware of immunization rates, allowing them to make informed decisions as to how such rates can be improved for the benefit of their children.

While some would argue that Connecticut, on average, has a high immunization rate, the data that were released this past Friday do show pockets of concern which can be improved through the release of these data. In this regard, DPH will continue to recommend that school officials work with their school medical advisor, school nurses, and their local health director to improve immunization rates where needed. The staff of the DPH Immunization Program is and will continue to be available to provide technical assistance to school medical advisors, school nurses, and our local health department partners.

Although you may disagree with the Department's position, please know that the Department has carefully considered this matter and made the decision to publish this immunization-rate data for the benefit of all Connecticut children.

Sincerely,



Renee D. Coleman-Mitchell, MPH
Commissioner